

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<b>Attorney Docket No.</b> AP10560	
		<b>First Inventor</b> Peter Rieth	
		<b>Title</b>	Method of Determining Forces and Torques Acting on a Riding Vehicle
		<b>Express Mail Label No.</b> EV223959745US	

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>	<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small> 2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small> 3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <b>21</b>]</span> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <li>- Descriptive title of the invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul> 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <b>1</b>]</span> 5. Oath or Declaration <span style="float: right;">[Total Sheets <b>    </b>]</span> <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))  <small>(for continuation/divisional with Box 18 completed)</small> <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b>  <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></li> </ul> </li> </ul> 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li> <li>b. Specification Sequence Listing on:               <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li> <li>ii. <input type="checkbox"/> Paper</li> </ul> </li> <li>c. <input type="checkbox"/> Statements verifying identity of above copies</li> </ul>
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<b>ACCOMPANYING APPLICATION PARTS</b>	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <span style="float: right;"><input type="checkbox"/> Power of Attorney</span> <small>(when there is an assignee)</small> 11. <input checked="" type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <span style="float: right;"><input type="checkbox"/> Copies of IDS Citations</span> 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small> 17. <input type="checkbox"/> Other: <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation    ☐ Divisional    ☐ Continuation-in-part (CIP)    of prior application No.: \_\_\_\_\_

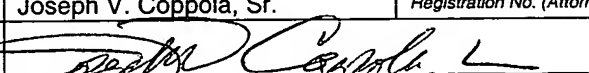
Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>19. CORRESPONDENCE ADDRESS</b>					
<input checked="" type="checkbox"/> Customer Number: <span style="border: 1px solid black; display: inline-block; width: 100px; text-align: center;">10291</span>		OR <input type="checkbox"/> Correspondence address below			
Name	RADER, FISHMAN & GRAUER PLLC				
	Joseph V. Coppola, Sr.				
Address	39533 Woodward Avenue				
	Suite 140				
City	Bloomfield Hills	State	MI	Zip Code	48304
Country	US	Telephone	(248) 594-0600	Fax	(248) 594-0610


Name (Print/Type)	Joseph V. Coppola, Sr.	Registration No. (Attorney/Agent)	33,373
Signature		Date	November 4, 2003

Utility Patent Transmittal

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV223959745US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.


Dated: November 4, 2003

Signature:  (Joyce A. Krumpke)
 22141 U.S. PTO  
 10/701275


<b>FEE TRANSMITTAL for FY 2004</b>				<b>Complete if Known</b>																																																																																																																																																																																																	
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1203	290	2203	145	Multiple dependent claim, if not paid																																																																																																																																																																																																	
1204	86	2204	43	** Reissue independent claims over original patent																																																																																																																																																																																																	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																																																																																																																																																																																	
<b>SUBTOTAL (2)</b>				(\$) 0.00																																																																																																																																																																																																	
<b>SUBMITTED BY</b> Name (Print/Type) Joseph V. Coppola, Sr. Signature 				(Complete if applicable) Registration No. (Attorney/Agent) 33,373 Telephone (248) 594-0650 Date November 4, 2003																																																																																																																																																																																																	

**Fee Transmittal**

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV223959745US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: November 4, 2003      Signature:  (Joyce A. Krumpe)